NWX - DISEASE CONTROL & PREVENTI (US)

Moderator: Dale Babcock
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Coordinator: Welcome and thank you for standing by. At this time, all participants are in listen-only mode until the question and answer portion. If you would like to ask a question today, please press star then one on your touchtone phone. You'll be prompted to record your first and last name.

The conference is being recorded. If you have any objection you may disconnect at this time. Now I'll turn the call over to your host, (Elizabeth Kalayil). Thank you. You may begin.

(Elizabeth Kalyle): Thank you. Welcome to the Healthcare Personal Safety Component Training Session for the Influenza Vaccination Summary and the Healthcare Personnel Vaccination Module. My name is (Elizabeth Kalayil) and I work as a contractor in the immunization services division at CDC.

I'll be presenting information during the first part of the webinar. This presentation will cover several topics. The first objective is to provide an overview of the National Healthcare Safety Network -- or NHSN -- and the

healthcare personnel vaccination module. This is where users will enter data for the healthcare personnel influenza vaccination summary.

The steps on how to get started in the healthcare personnel safety component will then be reviewed along with the surveillance and reporting requirements for the module and the data reporting forms that facilities will need to use. The last segment of the presentation will briefly outline data analysis features.

So, first, we will briefly cover some background information on NHSN.

NHSN is a secure internet-based surveillance system managed by the Centers for Disease Control and Prevention's Division of Healthcare Quality Promotion. The purposes of NHSN are to collect data from a sample of healthcare facilities to remit valid estimations of the magnitude of adverse events and adherence to practices to prevent adverse events.

NHSN also analyzes and reports the data collected to permit recognition of trends and provides facilities with data that can be used for inter-facility comparisons and local quality improvement activities.

NHSN also enables healthcare facilities to use the system to report healthcare-associated infections and prevention practice adherence data to the Centers for Medicare and Medicaid Services -- or CMS -- to fulfill CMS's quality and measure reporting requirements for those data. A comprehensive list of purposes can be found using the Web site link that's listed on this slide.

Assurance of confidentiality is provided by the Public Health Service Act. NHSN takes confidentiality very seriously and makes every effort to protect all facilities that participate.

NHSN is divided into five components -- patient safety, healthcare personnel safety, biovigilance, long term care facility, and dialysis. Each component can have multiple modules.

Outpatient dialysis facilities can only participate in the dialysis component and the healthcare personnel safety component. Please note that there is a patient-level influenza vaccination surveillance option in the dialysis component with an entirely separate protocol.

This training is focusing on the healthcare personnel safety component, which consists of two modules -- the healthcare personnel vaccination module and the healthcare personnel exposure module.

As shown in the previous flow chart, there are two modules within the healthcare personnel safety component, the healthcare personnel exposure module and the healthcare personnel vaccination module. The influenza vaccination summary is located within the healthcare personnel vaccination module.

Staff members and healthcare facilities can use the influenza vaccination summary to monitor influenza vaccination percentages among healthcare personnel. This summary-level reporting replaces individual-level reporting of vaccination status for healthcare personnel, which was previously available through NHSN.

So now we'll go over some of the basic elements of the healthcare personnel influenza vaccination summary.

Healthcare facilities can use the healthcare personnel vaccination module within NHSN to enter healthcare personnel influenza vaccination summary

data. It's designed to ensure that healthcare personnel influenza vaccination reported coverage is both consistent over time within a single healthcare facility and comparable across facilities.

Using NHSN reporting requirements to monitor influenza vaccination among healthcare personnel may also result in increased influenza vaccination uptake among healthcare personnel because improvements in tracking and reporting healthcare personnel influenza vaccination status will allow healthcare institutions to better identify and target unvaccinated healthcare personnel. Increased influenza vaccination coverage among healthcare personnel is expected to result in reduced morbidity and mortality related to influenza virus infection.

Data are collected on the number of healthcare personnel physically working at the healthcare facility or what we call the denominator. To be included in the denominator, healthcare personnel must be physically present in the facility for at least one working day between October 1 through March 31. This includes both full-time and part-time healthcare personnel.

There are three required denominator categories -- employees; licensed independent practitioners; and adult students, trainees, and volunteers.

Facilities are required to collect data on the number of healthcare personnel who receive influenza vaccination, medical contraindications, declined vaccination, or had an unknown vaccination status. This is called numerator data. Each facility must report all numerator categories for the three required denominator categories.

So the next slide provides an overview on how to get started in the healthcare personnel safety component.

Now we'll talk about how to use the healthcare personnel safety component. First, we will go over some key roles in NHSN.

The facility administrator is the person enrolling the facility in NHSN and can activate additional components for a facility; has add/edit/delete rights to facility data, users, and users' access; has the authority to nominate or join groups for data sharing; and can reassign the role of facility administrator to another user. There can only be one facility administrator per facility.

Users have the ability to view, enter, and analyze data, but these rights are determined by the facility administrator or another user with administrative rights.

For facilities who participate in the healthcare personnel safety component, they must either enroll in NHSN or activate the healthcare personnel safety component in NHSN. Enrollment in NHSN is required for facilities that are currently not participating in NHSN and wish to participate. Please follow the link on this slide for more information on enrollment.

During the enrollment process, dialysis facilities may choose to participate in either or both the dialysis component and healthcare personnel safety component. If a facility is already enrolled in NHSN and wishes to participate in the healthcare personnel safety component, the facility must activate the component within NHSN.

If your facility is not enrolled in NHSN, you must designate an individual to be an NHSN facility administrator, and then complete the five-step enrollment process. If your facility is already enrolled in NHSN, you must get in contact

with your NHSN facility administrator and ask him or her to activate the healthcare personnel safety component.

If you're unsure of your facility's status within NHSN, please email NHSN@cdc.gov for more information.

To activate the healthcare personnel safety component, the facility administrator logs into the secure access management services, or SAMS. Please note that only the NHSN facility administrator can activate a new component.

Next, click "NHSN Reporting" from the SAMS login page. From the home page, the facility administrator will select add/edit component under the facility tab. Next, the facility administrator will check the healthcare personnel safety component box.

The facility administrator can then add the name, phone, e-mail, and address for this person so that he or she can be reached if CDC or NHSN has updates or questions about the healthcare personnel safety component.

The facility administrator can then add the primary contact within the NHSN facility and next can also add the primary contact as a user. To do so, the facility administrator should click "Users" on the navigation bar, and then click "Add."

Next, the facility administrator should complete the mandatory fields for the Add User screen which consists of the user ID, first name, last name, and email address.

Other users can be added by the facility administrator or the new healthcare personnel safety component primary contact. The facility administrator should also make sure that at least one healthcare personnel safety component user has administrative rights and, in general, this should be the healthcare personnel safety component primary contact.

Users with administrative rights will be able to add additional healthcare personnel safety component users and share data using the group function for the component.

The Edit User screen should appear after you save the new user information. The user with administrative rights can then select the level of rights to confer to the user. This step must be completed for new users to have access to any system features within the healthcare personnel safety component. Please be sure to confer the proper rights to users.

New users to NHSN must register with SAMS and will automatically receive an invitation to SAMS after being added as a user to the NHSN facility. After receiving an invitation to register, individuals will need to complete and submit identity verification documents to CDC. You will receive confirmation once these documents are approved, and a SAMS card will be delivered to your home address. You will then be able to access NHSN using your SAMS credentials.

You can find information about the SAMS process using the link that's listed on this slide.

And now we will review the specific reporting requirements for the healthcare personnel influenza vaccination summary.

The healthcare personnel influenza vaccination summary protocol provides guidance for a facility to collect and report influenza vaccination summary data for the healthcare personnel vaccination module. It includes comprehensive information about reporting requirements and specifications such as numerator and denominator categories, methodology, data analyses, and key terms. Each facility should thoroughly review the protocol before collecting and entering data in NHSN.

As mentioned previously, there are three required denominator categories. One category consists of employees, while the other two categories consist of non-employees. One nonemployee category is licensed independent practitioners and the other nonemployee category includes adult students, trainees, and volunteers.

To be included in the denominator, all healthcare personnel must be physically present in the facility for at least one working day during a reporting period, and this is between October 1 through March 31.

This slide shows the top portion of the healthcare personnel influenza vaccination summary form, which lists the denominator categories. Employees are defined as all persons receiving a direct paycheck from the healthcare facility regardless of clinical responsibility or patient contact.

The second denominator category consists of nonemployee licensed independent practitioners; specifically physicians, advanced practice nurses, and physician assistants who are affiliated with the healthcare facility but are not on the facility's payroll. And again, that's regardless of clinical responsibility or patient contact. This category also includes post-residency fellows.

The third required denominator category consists of nonemployee adult students, trainees, and volunteers who are aged eighteen and over. This is defined as medical, nursing, or other health professional students, interns, medical residents, or volunteers aged eighteen or older that are affiliated with the healthcare facility but are not on the facility's payroll, regardless of clinical responsibility or patient contact.

The fourth denominator category consists of nonemployee contract personnel. Reporting for this category is optional at this time. Contact personnel are defined as persons providing care, treatment, or services at the facility through a contract who do not fall into any of the other denominator categories. Some examples include occupational therapists, admitting staff, and pharmacists. Please refer to Appendix A of the healthcare personnel influenza vaccination summary protocol for a suggested list of contract personnel.

If a facility decides to report contractor data, it can note which categories of contract personnel are included in their data by using the comments function in NHSN. And this will be noted later in the presentation.

The numerator includes healthcare personnel who received an influenza vaccination during the time from when the vaccine became available -- for example, August or September -- through March 31 of the following year. There are five numerators fields in the NHSN module, and these are mutually exclusive.

This slide shows the numerator categories as they appear on the healthcare personnel influenza vaccination summary form. The categories include influenza vaccination received at the healthcare facility or elsewhere, medical contraindications, declinations, and unknown vaccination status.

The first numerator category is healthcare personnel who received an influenza vaccination either at this healthcare facility or elsewhere. Please note that these are two separate fields in the NHSN module. The first field includes healthcare personnel who received an influenza vaccination at this healthcare facility since influenza vaccine became available this season.

The second field includes healthcare personnel who were vaccinated outside of the healthcare facility since influenza vaccine became available this season, and provided a written report or documentation of influenza vaccination. Acceptable forms of documentation include a signed statement or form, an electronic form or email form the healthcare worker, or a note, receipt, or vaccination card from the outside vaccinating entity. Verbal statements are not acceptable for the module.

The second numerator category is healthcare personnel who have a medical contraindication to influenza vaccine. For this measure, for inactivated influenza vaccine, accepted contraindications include a severe allergic reaction after previous vaccine dose or to a vaccine component including egg protein, or a history of GBS within six weeks after previous forms of vaccination.

Healthcare personnel who have a medical contraindication to live, attenuated influenza vaccine other than a severe allergic reaction to a vaccine component or history of GBS within six weeks after previous influenza vaccination should be offered inactivated influenza vaccine by their facility if that's available.

Therefore, the medical contraindications listed above are the only accepted contraindications for the module. Documentation is not required for reporting a medical contraindication and verbal statements are acceptable.

The third numerator category is healthcare personnel who are offered and declined to receive the influenza vaccine. Documentation is not required for reporting declinations.

The fourth numerator category is healthcare personnel with unknown vaccination status, or they did not meet any of the criteria for the other numerator categories.

This slide reviews a few points about the reporting requirements. Facilities are only required to report data once at the conclusion of the reporting period, which is from October 1 through March 31. Healthcare personnel who are physically present in the healthcare facility for at least one working day between October 1 through March 31 are included in the denominator because October 1 through March 31 is the reporting period. Therefore, healthcare personnel always working offsite or out of state should not be counted since they are not physically working in the facility.

Healthcare personnel in the denominator population who receive an influenza vaccination during the time from when the vaccine became available -- for example, August or September -- through March 31 of the following year are counted as vaccinated since influenza vaccine for a give influenza season may be available as early as August or September.

Please note that the denominator categories are mutually exclusive. The numerator data are to be reported separately for each of the denominator categories. For example, if you have a total of twenty healthcare personnel working at your facility, then you may report that twelve healthcare personnel are employees, six are licensed independent practitioners, and two are adult students, trainees, and volunteers.

It's important to remember that the numerator data are mutually exclusive. The sum of the numerator categories should be equal to the denominator for each healthcare personnel group. So, for example, if there are twenty-five employees working at your facility, you may report that fifteen received influenza vaccination at the healthcare facility, five employees received vaccination outside the facility, and five employees declined vaccination.

So now I will turn things over to my colleague, (Christi Lines), and she'll be reviewing the remaining slides for this webinar.

(Christie Lines): Thank you (Elizabeth). My name is (Christie Lines) and I work as a contractor in the Division of Healthcare Quality Promotion at CDC. We will now go over data entry in NHSN.

After a facility has enrolled in NHSN or has activated the healthcare personnel safety component and added users, then staff members at each facility must complete two required forms -- the healthcare personnel safety monthly reporting plan form and the healthcare personnel influenza vaccination summary form.

The seasonal survey on influenza vaccination programs is not required, however facilities are encouraged to complete this short survey as the information will be very helpful for CDC. The survey aims to gather information on influenza vaccination programs for healthcare personnel by collecting data on types of personnel groups that are included in a facility's annual influenza vaccination campaign, the message the facility is using to deliver influenza vaccine to its healthcare personnel, and the strategies the facility uses to promote or enhance healthcare personnel influenza vaccination.

Now we will go over how to navigate through NHSN. You can access the activity home page by clicking on the link listed on this slide. You will then need to enter your SAMS username and password, followed by your SAMS card numbers. If you have questions or need assistance with using SAMS, please contact the SAMS helpdesk toll free by phone or by email using the information listed here.

This slide shows the NHSN home page. Select the appropriate component, healthcare personnel safety, and facility from the dropdown boxes. Next, click the "Submit" button to proceed.

While you're navigating through NHSN, use the "NHSN" button, but not the Web browser button. While navigating through NHSN, you can always see which facility, user, and components are in use at the top of the screen.

This slide shows the healthcare personnel safety component home page. You will see that there's a navigation bar on the left-hand side of the Web page which you will use to access different parts of the module.

The monthly reporting plan collects data on the modules and months the facility plans to participate. Influenza vaccination summary should be selected for the plan and information is automatically updated for the entire influenza season as defined by NHSN as July 1 to June 30. After the initial monthly reporting plan has been added for that influenza season, the user will not need to add any other reporting plans.

Please note that the monthly reporting plan must be completed once each influenza season before any influenza vaccination summary data can be entered.

Please note this slide shows what dialysis facilities will see on their screen in NHSN when adding a monthly reporting plan. To add a monthly reporting plan, click "Reporting Plan" and then add on the navigation bar. Select the correct month and year from the dropdown menu. The user should check the box next to "Influenza Vaccination Summary" under the Healthcare Personnel Vaccination module.

After making the appropriate selections, the user must click "Save." Each facility will use the healthcare personnel influenza vaccination summary form to collect summary data. The NHSN module contains a single data entry screen to input summary data for each influenza season.

When a user enters data, all previously entered data for that season will be overwritten. A modified date will be auto-filled by the system; therefore if a facility would like to keep track of its monthly numbers, it should maintain some record of this as it will not be able to review monthly reporting numbers in NHSN.

CDC and NHSN encourage that healthcare personnel influenza vaccination summary counts be updated on a monthly basis. However, as mentioned earlier, entering a single influenza vaccination summary report at the conclusion of the reporting period will meet the minimum data requirements for NHSN participation.

The user will see that the NHSN data entry screen is set up similar to the layout of the healthcare personnel influenza vaccination summary form. Question one on the form pertains to the denominator while questions two through six pertain to the numerator.

The table of instructions for the influenza vaccination summary provides instructions and complete definitions for each data field for the denominator and numerator categories in the module. This document is located within the influenza vaccination summary protocol. This slide highlights the employee category. The user can see the definition of an employee in the right-hand column.

To enter summary data, go to "Add" under "Flu Summary" on the navigation bar. Click "Continue" to proceed as influenza vaccination summary data appears as the default option on the dropdown menu. Please remember that you will not be able to enter summary data until you have first added your monthly reporting plan.

This is what dialysis facilities will see on their screen in NHSN when adding influenza vaccination summary data. You must complete all fields marked with an asterisk on this page. Influenza and seasonal are the default choices for vaccination types and influenza subtype. The user would then select the appropriate flu season in the dropdown box; for, example, 2015-2016.

This slide shows what the data entry screen looks like in the NHSN module. The asterisks on the screen indicate the columns that must be completed. Users can use the tab key on their computer keyboard to move across columns. Users should enter a "zero" in the field if no healthcare personnel at the facility fall into that category.

Staff at facilities can use the custom fields function for data they would like to collect and analyze consistently such as positional detail on specific types of healthcare personnel. The comments box can be used to enter additional information which are usually side notes or reminders. However, the information may not be analyzed.

If your facility would like to track subsets of individuals within NHSN such as nurses and physicians, the custom field can be used to keep a separate count for your own purposes. Using the custom fields function is optional and will briefly describe the steps when using it.

First go to "Customize Forms" under "Facility" on the navigation bar. You should make sure that the mandatory fields for form type, form, description, and status are completed.

Next, you should enter a label or variable name for the custom field. You will also select the type of each custom filed, which will be alphanumeric, numeric, or date field. After this, you will designate whether each field is active or inactive. Active indicates the custom field will be available for use on the form; inactive indicates that the user will see the custom field on the form but it will not be available for use.

You should click the "Save" button when finished. After clicking "Save," a message will appear at the top of this screen indicating that the custom fields have been successfully updated. The user will now be able to see the custom fields at the bottom of the data entry screen.

For each update of the influenza vaccination summary data after the initial entry, you will see a message at the top of the screen indicating that a record of the summary data already exists. The date last modified shows when data were last entered and saved.

Click "Edit" at the bottom of the screen to modify existing data. Once complete, be sure to save the updated data by clicking the "Save" button at the bottom of the screen. You should see a message confirming that you data have

been saved. This will appear at the top of your screen. The date last modified will also be automatically updated by NHSN.

We will now talk about submission of your healthcare personnel influenza vaccination summary data. Facilities are only required to report data once for the entire reporting period, which is from October 1 through March 31. The deadline to submit final data for the influenza season is May 15. Data submitted after this date will not be transmitted to CMS.

Facilities are given the option to review their data that will be sent to CMS. To access the data in NHSN, please use the link listed on this slide to obtain instructions when generating a report.

We will now go over the data analysis features for the healthcare personnel influenza vaccination summary. To view data, go to "Generate Data Set" under "Analysis" on the navigation bar. Click "Generate New" and select "Okay" when a message appears on your screen that says "The current data set will be overwritten. Are you sure you want to continue?" users should generate a new data set after each time they enter new data into the system.

Next, go to "Output Options" under "Analysis" on the navigation bar. You will see several folders on the screen. Click on the HCW Vaccination Module folder, then the Influenza folder, and the CDC defined output folder. To view the default output, click "run" to see total numbers or summary counts, percentages, vaccination compliance figures, and vaccination noncompliance figures.

In the summary count report, the user has the ability to view totals listed by influenza season and by variable. This example shows that 400 employees worked during the required time period during the 2011-2012 influenza

season; while twenty-five employees worked during the required time period during the 2012-2013 influenza season.

Two overall totals are presented. One number includes the total number of healthcare personnel working without other contract personnel, which is 420 healthcare personnel for the 2011-2012 influenza season. Another number shows the total number of healthcare personnel working with other contract personnel, which is 427 healthcare personnel for the 2011-2012 influenza season. Please note that reporting contract personnel is not currently required. Therefore, it's fine if zero is entered for the number of contractors, even if there are contractors working in a given facility.

Facilities can visit the NHSN Web site using the link on this slide. The Web site contains links to the protocol, data collection forms, frequently asked questions, comprehensive training slides, and recorded training for healthcare personnel influenza vaccination summary reporting.

If you have any questions about NHSN, please send an email to user support at NHSN@cdc.gov. You should also include HPS flu summary in the subject line of the email and specify that you are an outpatient dialysis facility, as this will help us better assist you.

This concludes the slide presentation for the webinar. Now we will have the opportunity to take questions.

Coordinator: Thank you. If you would like to ask a question, please press star then 1 on your touchtone phone. You will be prompted to record your first and last name, and called on at your turn. Please check that your phone is unmuted before you record your name.

If you decide to withdraw your question after you've joined the queue, please press star 2. One moment for the first question.

We have a question from (Joan Samar). Your line is open.

(Joan Samar):   Yes, good morning. We are affiliated with a hospital and they currently have been reporting this information because it's mandatory for us as employees. Will we be doing duplicate reporting in the future now?

(Elizabeth Kalayil):   Yes, thanks for your question. When you're reporting data for your dialysis facility, you would only include those individuals who actually work in your facility for one day or more during the reporting period, and that's October 1 through March 31. So really, your outpatient dialysis report should be a subset of your hospital.

(Joan Samar):   But what I'm saying is the hospital is already entering our information through our employee health and infection control department. So as the dialysis, am I going to be doing that again?

(Megan Lindley): This is (Megan Lindley) from CDC. Now that was correct for the previous years because there was no separate requirement for outpatient dialysis, now that outpatient dialysis is required you should enter, as (Elizabeth) said, for your facility only. And the dialysis folks should not be included in the hospital report unless they also work in the hospital. So there's potential for overlap there, but otherwise there are s two separate reports. .

(Joan Samar):   Okay. So we'll check with our hospital infection control department to see what they're going to be doing.

(Megan Lindley): Yes. See if they can pull those numbers out for you.

(Joan Samar):   Okay, thank you.

Coordinator: Thank you. We have a question from (Debra Howinski). Your line is open.

(Debra Howinski):   Hi, yes. I actually have a couple of questions, but just to tag onto the previous caller, we're the same situation -- hospital-based unit. I understand that for outpatient we'll - that'll be a separate reporting. We do have staff, though, that provide acute services in the hospital. So would they - we would not include them in our outpatient data set is what I'm understanding. They would be reported by the hospital.

(Megan Lindley): Do they only provide acute services in the hospital, no outpatient?

(Debra Howinski):   Yes, right.

(Megan Lindley): Then that's correct. The hospital would count them and you would not.

(Debra Howinski):   Okay. All right. My other question has to do with the staffing that's included. You mentioned full time and part time. We do have some per diem status. I'm assuming we would include those.

(Elizabeth Kalayil :   Yes. You would include the per diem employees as long as they actually work in your facility for one day or more during the reporting period.

(Debra Howinski):   Okay. And the last question is - are these slides going to be available to download at some point?

(Elizabeth Kalyle):   Yes. They're actually already posted on the CDC Web site.

(Debra Howinski):   Okay.

(Elizabeth Kalyle):   So you can view the slides right now.

(Debra Howinski):   Okay. Thank you.

Coordinator: Next question is from (Dahlia Spencer). Your line is open.

(Dahlia Spencer): Hi. I was unable to actually see the slides, so I'm glad they're going to be posted. But I did look for the slides while I was on the call and I couldn't find it. I couldn't get the Java downloaded. It just was blocked by my security.

So if I was to access the file, what should I go under? Should I just go under the webinar name?

(Elizabeth Kalyle):   You can send an email to Izlearn and we'll be able to send you the correct link through that.

(Dahlia Spencer): Izlearn.com or...

(Elizabeth Kalyle):   Izlearn@cdc.gov.

(Dahlia Spencer): Okay. Thank you.

Coordinator: We have a question from (Audrey Adams). Your line is open.

(Audrey Adams): Yes, I have a question regarding the monthly reporting requirement. If we basically take the option of only entering our summary data at the end of the time period, we have a deadline of May 15. So let's say if we decide to do all of our summary information at one time -- let's say on May 1 -- do I still need

to have a monthly reporting plan? Can I just put my plan in for that particular month that I'm entering all of my data at one time?

(Elizabeth Kalyle):   You would still need to put in your monthly reporting plan. So, for example, you could go in and put in, let's say, May 2015 as a monthly reporting plan, and then enter your summary data. And what happens is once you enter your monthly reporting plan it populates all the other months for that NHSN flu season. So you don't have to do it over again. So just entering that one reporting plan and entering your final data will be enough to satisfy the requirement.

(Adurey Adams): Okay. And if by chance we do decide to start entering it monthly, you mentioned that the reporting plan would start from July - I believe you said - through what month?

(Elizabeth Kalyle):   Well, the NHSN defined reporting plan goes from July through June. So even if you decide to put in your data on a monthly basis, you still would only need to select one month that is within that flu season. So let's say you started to report your data beginning in October of 2015. You could actually put in October 2015 for your monthly reporting plan and, again, you would be finished for the entire flu season. You wouldn't have to put in a plan again.

(Audrey Adams): Okay. Thank you very much.

Coordinator: If anyone else would like to queue up and ask a question please press star 1 at this time. Unmute your phone and record your name.

(Joan Samar), your line is reopened.

(Joan Samar):   Yes, we also have questions with Java and didn't see some of the screens. So if I'm understanding, according to the last couple of comments if I fill in my reporting plan for October but I get more staff that come to my facility after that, I don't have to go back and readjust.

(Megan Lindley): So to clarify, you don't have to adjust your monthly reporting plan because the way this flu reporting is set up, you do one plan for the entire season, which if you all are familiar with some of the other NHSN reporting that's different. You actually do have a plan in place for every single month.

So when you enter that single monthly reporting plan, you're done with that part. But you still would need to go into your flu summary report and add those new people. Does that make sense?

(Joan Samar):   Yes. And I also have staff in my outpatient facility that do work on the acute team periodically at the hospital.

(Megan Lindley): So in that case the hospital would need to count those folks in their acute numbers.

(Joan Samar):   But they're only there maybe, say, once a month. But they're primarily working in the dialysis outpatient facility.

(Megan Lindley): So for this reporting, healthcare personnel are reported by every facility in which they work during that October 1 through March 31 period. So if they're in the hospital even for one day during that time they would still be counted in both reports.

(Joan Samar):   Okay. Thank you.

Coordinator: Thank you. (Jennifer Ziplin), your line is open.

(Jennifer Ziplin):   Yes, hi. I was curious if you guys had a deadline for getting the flu
                     vaccination that you set because I'd like to put one in my office. It's just I
                     don't want to leave it open for people to take the flu shot at the very last
                     month.

(Megan Lindley):   Well, for this reporting there's no CDC specific definition. But for NHSN
                     reporting, the latest date that it can be obtained is March 31. Anybody's who's
                     vaccinated after March 31 would not be counted even if they do receive the
                     vaccine. So that would be a good deadline.

(Jennifer Ziplin):   Okay. And it hasn't become mandatory yet by the CDC for all healthcare
                     workers to get the flu vaccination?

(Megan Lindley):   No. CDC doesn't make vaccination requirements for anyone. We only make
                     recommendations.

(Jennifer Ziplin):   Okay, that's it. Thank you.

Coordinator: (Leslie Conley), you may ask your question.

(Leslie Conley):   Yes, hi. I work in a hospital-based facility and I do understand the reporting
                     would be for only those nurses that work in the dialysis unit and those
                     physicians that I would report them. I just want to clarify - does the hospital
                     report the students and my dietician, et cetera, who work throughout the whole
                     hospital? I'm still not clear about that.

(Elizabeth Kalayil : Now do these students work - now they're working in the hospital. Do
                     they also work in the outpatient dialysis facility?

(Leslie Conley):   Yes, they'll rotate through the dialysis facility. They'll work maybe one day.

(Elizabeth Kalyle):   Okay. Well then in that case you would report the students in both your hospital count and your outpatient dialysis count.

(Leslie Conley):   Okay. What about the dietician who works? She's a dietician for the hospital and the dialysis unit. Is that the same?

(Megan Lindley):   does she physically enter the dialysis unit?

(Leslie Conley):   Yes.

(Megan Lindley):   Then you would count her also.

(Leslie Conley):   So they're reported twice then -- once by the hospital and once by me?

(Megan Lindley):   That's correct. Those reports to go CMS separately. So there's some people that are counted in both but they're not getting doubled up.

(Leslie Conley):   Okay. All right, that makes sense. Thank you.

Coordinator: Thank you. One moment while I get the next name.

                      (Denise Kelsey), you may ask your question.

(Denise Kelsey):   Hi, yes. I know that you guys just mentioned that the CDC cannot make the vaccination a requirement but just a recommendation. Now, in the past, I know that if staff have declined the vaccination that there has been a protocol

that they are required to have to wear a mask when providing any kind of patient care. Is that no longer the case?

(Megan Lindley): So, again, that's a decision that would be made by your individual healthcare facility. So there's no requirement of that type from CDC's perspective for NHSN reporting. All we would ask is that you would note that person is included in your declined vaccination. But it's really the choice of our facility what happens to somebody when they decline vaccination.

(Denise Kelsey): Okay. I thought it was - at one point it was a state requirement that anyone in New York State, anyway - to wear a mask if they declined the flu shot.

(Megan Lindley): Okay. And it is important to note that NHSN reporting requirements and CDC's recommendations may differ from state requirements. So if that is a law in New York, and I believe that is the case, then you would want to check probably with your state or local health department to see what the protocol is.

(Denise Kelsey): Okay. Thank you.

Coordinator: And at this time we have no further questions queued up.

(Elizabeth Kalayil): I just wanted to say thank you to everyone for participating. And if you have any other questions that you think of later, feel free to email us at NHSN@cdc.gov. And we will get back with you.

Thanks again.

Coordinator: We have had another question come up. Do you have time to take that?

(Elizabeth Kalayil: Yes.

Coordinator: One moment. I'll get the name.

(Mary), your line is open.

(Mary): Thank you. I'm still not too clear about the documentation if an employee receives it from the outside facility. What do you mean by a healthcare - they need to show a documentation that they received it from a different facility?

(Elizabeth Kalayil): Yes. So for example, if an employee goes to CVS pharmacy to get their flu vaccination, they could either bring to you a receipt of vaccination from CVS or they could email you a statement saying that they received vaccination at CVS in September of 2015. That email would also be sufficient. So it's some type of documentation that will show that they received influenza vaccination elsewhere.

(Mary): Okay. And there's a field on the computer that would have a - that lets us know that documentation?

(Elizabeth Kalayil): Well, when you do enter your data, you're just entering the numbers. So you won't have to indicate that on the data entry screen. But you will have the documentation with you at your facility. So you don't have to upload it or anything like that.

(Mary): Okay. Thank you.

(Elizabeth Kalayil): Sure.

Coordinator: Excuse me, this is the operator. We have had another name come up.

(Elizabeth Kalayil):   Okay, that's fine.

Coordinator: (Fiona Gloria Deans), your line is open.

(Fiona Gloria Deans): Hi. I just needed to get the email address again to get the information
                      about the WebEx. I was not able to download it either. If I could just get that...

(Elizabeth Kalayil):   Sure. It's Izlearn@cdc.gov.

(Fiona Gloria Deans): Was that D-O-V?

(Elizabeth Kalayil):   G-O-V like in government.

(Fiona Gloria Deans): Oh, G.

(Elizabeth Kalayil):   Yes.

(Fiona Gloria Deans): All right. Thank you.

(Elizabeth Kalayil):   Sure.

Coordinator: We have a question from (Sappora Breela). Your line is open.

(Sappora Breela): Yes, hi. I just wanted to clarify because I know you've mentioned before that
                   the outpatient dialysis should not be reported by the hospital, right? So will
                   there be like a newsletter or a memo to the hospital so that they will be aware
                   that we are not part of the reporting?

(Megan Lindley): So we've updated the - there's documents called operational guidance that
                  CDC provides to explain CMS requirements. And we've updated the

operational guidance for acute care hospitals to note that dialysis facilities are now excluded. If you have - if you're getting a challenge or a question from the facility that you're affiliated with, you can certainly refer them to us. Just send to NHSN@cdc.gov and we'll clarify.

And this is something that acute care hospitals have experienced before because for the inpatient rehabilitation facilities that are in many hospitals they used to be - it's the same situation. They used to be part of the hospital reporting and now there's a separate requirement. So now they're no longer part. Obviously, feel free to refer those questions to us.

(Sappora Breela): Okay, perfect. Thank you.

(Megan Lindley): Operator, are there any more questions?

Coordinator: Yes. we have one more question. Ms. (Mangrew), your line is open.

(Mangrew): Yes, hi. Good afternoon. Thanks for this information, but I do have a question regarding the reporting categories. Last year what you included was rehab and I didn't hear any mention about rehab this year. should that still be a category for us to enter?

(Elizabeth Kalayil): If you reported data for your inpatient rehab facility last year, then yes, you would continue to do that for the 2015-2016 influenza season. Now, for that, there wasn't any type of change in reporting requirements. So we didn't offer training this year, but be sure that you continue to report for that as well.

(Mangrew): Okay. So the dialysis is something new for this season?

(Elizabeth Kalayil): Yes, that's correct.

(Mangrew):   Okay. Thank you.

(Elizabeth Kalayil):   Sure.

Coordinator: And that is our last question at this time.

(Elizabeth Kalayil):   Thank you.

Coordinator: This will conclude today's conference call. Thank you all for your

                    participation. All parties may disconnect at this time.

                                        END